

Boston Healthy Homes Partnership Intake / Screening Form

Date / Time of inquiry: _____

My name is _____. I'm the program manager for the Boston Healthy Homes Partnership project, a research study that will look at the effectiveness of home improvements on your child's health. Thank you for calling about the Project.

To be in the study, you must live in Boston, have a child under 17 years diagnosed with asthma, and live in a non public housing home. You can live in an apartment using a Section 8 voucher. You cannot be in another asthma research study. Your home cannot have major damage costing more than \$20,000 in repairs. You must sign a consent form. I am going to ask you some questions to see if you are eligible.

Name: _____

Phone #: (H) _____ (W) _____

Street Address: _____

Zip Code: _____

Is the building run by the Boston Housing Authority (BHA)? No Yes (not eligible)

Do you rent your apartment with a Section 8 voucher? Yes No

Number of children with asthma in home: 1 2 3 4 more _____

What are their ages? _____ (one must be under 17 years)

Is anyone currently in any other asthma or home study? No Yes(not eligible)

Does your home have major damage? No Yes (not eligible)

If yes, can you describe the damage? _____

(If cannot describe, may prompt: leaking roof? Plumbing? Lead?) _____

How did you hear about the project? _____

If ineligible: I'm sorry, but you are not eligible. The Office of Environmental Health (OEH) can still provide a home evaluation for you, as resources become available, though you will not be eligible for the study.

Would you still like the OEH to arrange a home evaluation? Yes No

If eligible: You seem to qualify. Now I would like to explain how the study works.

The Boston Healthy Homes Partnership is a study of how changes in the home can reduce the risk for asthma, lead poisoning and injuries for children. Participants will receive a home inspection for asthma risks, lead poisoning hazards, and childhood injury hazards, and will make recommendations based on this inspection.

Two evaluators will come to your home. The visit will take about two hours. They will explain the study in detail and ask you to sign the informed consent form. They will be walking through all the rooms of your house. They may go into your basement. They may take pictures with your permission. Someone will be asking you questions about your home, neighborhood, health and housekeeping practices. We'll also ask permission to review your child / children's medical records. At the visit, you're child with asthma may receive a simple breathing test and will have a sample of blood taken, so your child with asthma must be available during the visit. The inspectors will be leaving air sampling bags overnight. Someone will have to be available so that they can pick these up the next day.

Recommendations will be made based on this visit (they will be sent to you in the mail). We will call you to make sure that you received these. Some of these will require little or no money to be put into place. Everyone who participates in this project will receive a free house cleaning, vacuum cleaner, cleaning supplies, air conditioner, asthma and injury prevention supplies and an extermination if necessary. Half of participants will be chosen at random (like flipping a coin) to receive a small amount of money to make construction changes to their home. We can provide technical assistance working with you and your landlord to identify a contractor and do this work.

We will do a repeat home visit one month after you have received all your free supplies. Every 2 months, we will call you to ask you questions about your child's asthma and how the supplies are. After one year, we will schedule a last home visit with you to ask some survey questions. Altogether, your entire involvement should take about 10 hours over the course of a year. We will give you gift certificates for \$20 for your time at each home visit and for \$10 after every telephone call interview for your time and effort.

Are you still interested in participating? Yes No

I will send an outline and the consent form for the project to your home to review. You must discuss this with all the members of your household and they must all agree to participate.

Will you do this? Yes No

I would like to schedule a follow-up phone call to discuss any questions you have after receiving the outline and consent form for the project. When is a good time to call?

I would like to make an appointment now for a home visit. When are you available to have us come to your home? _____

Do you have any other questions?_____

Reminder phone calls:

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Notes: _____
